

N. B. In case of more than one child at a birth, a SEPARATE RETURN must be made for each, and the number of each in order of birth stated.

# ARIZONA STATE BOARD OF HEALTH

## BUREAU OF VITAL STATISTICS

### STANDARD CERTIFICATE OF BIRTH

State File No. 175  
Registered No. 31

#### 1. PLACE OF BIRTH

County Yuma State \_\_\_\_\_  
District or Township \_\_\_\_\_ or Village \_\_\_\_\_  
City Hayden No. \_\_\_\_\_ St. \_\_\_\_\_ Ward \_\_\_\_\_  
(If birth occurred in a hospital or institution, give its NAME instead of street and number)

#### 2. Full name of child

Baby Howard

If child is not yet named, make supplemental report, as directed.

#### 3. Sex of Child

Male

To be answered ONLY  
In event of plural  
births.

#### 4. Twin, triplet or other

\_\_\_\_\_

#### 6. Legitimate?

Yes

#### 7. Date

May 27 1926  
Month Day Year

#### 8.

#### FATHER

Full name George Howard

#### 9. Residence

(Usual place of abode)

Hayden  
Ariz

If non-resident, give place and state.

#### 10. Color or race

Mexican

#### 11. Age at last birthday

25 (Years)

#### 12. Birthplace (city or place)

(State or country)

Nozales Arizona

#### 13. Occupation

Nature of industry

Fork Driver

#### 14.

#### MOTHER

Full maiden name

Rebecca Pemberton

#### 15. Residence

(Usual place of abode)

Hayden

If non-resident, give place and state.

#### 16. Color or race

Mexican

#### 17. Age at last birthday

21 (Years)

#### 18. Birthplace (city or place)

(State or country)

Patehar  
Mexico

#### 19. Occupation

Nature of industry

House Wife

#### 20. Number of children of this mother

3

(Taken as of time of birth of child herein certified and including this child.)

#### (a) Born alive and now living

0

#### (b) Born alive but now dead

0

#### (c) Stillborn

0

#### 21. Were precautions taken against ophthalmia neonatorum?

No

#### CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

I hereby certify that I attended the birth of this child, who was

stillborn

at 8:30 p.m. on the date above stated

(Born alive or stillborn)

Signature

Charles H. Smith, M.D.

(Physician or midwife)

\*When there was no attending physician or midwife, then the father, householder, etc., should make this return. A stillborn child is one that neither breathes nor shows other evidence of life after birth.

Given name added from

a supplemental report

Month, day, year

Address Hayden, Arizona

Filed May 28, 1926

M. B. Dush

Registrar

Registrar

041-527-996